

13281 U.S. PTO

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PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))</small>		Attorney Docket No. 1740-000093/US	
		First Inventor Kang Soo SEO, et al.	
		Title RECORDING MEDIUM HAVING A DATA STRUCTURE FOR MANAGING REPRODUCTION OF TEXT SUBTITLE DATA AND METHOD AND APPARATUS OF RECORDING AND REPRODUCING	
		Express Mail Label No.	
APPLICATION ELEMENTS			
<small>See MPEP chapter 600 concerning utility patent application contents.</small>			
<div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small></div> <div>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</div> <div>3. <input checked="" type="checkbox"/> Specification [Total Pages 21] <small>(preferred arrangement set forth below)</small><ul style="list-style-type: none">- Descriptive title of the invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the invention- Brief Summary of the invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure</div> <div>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 7]</div> <div>5. Oath or Declaration [Total Pages 3]<div style="margin-left: 20px;">a. <input checked="" type="checkbox"/> Newly executed (copy)</div><div style="margin-left: 20px;">b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <small>(for a continuation/divisional with Box 18 completed)</small></div><div style="margin-left: 20px;">i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></div></div> <div>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</div>		<div>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i></div> <div>8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i><div style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Form (CRF)</div><div style="margin-left: 20px;">b. Specification Sequence Listing on:<div style="margin-left: 20px;">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</div><div style="margin-left: 20px;">ii. <input type="checkbox"/> paper</div></div><div style="margin-left: 20px;">c. <input type="checkbox"/> Statements verifying identity of above copies</div></div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">ACCOMPANYING APPLICATIONS PARTS<div>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</div><div>10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></div><div>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></div><div>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</div><div>13. <input type="checkbox"/> Preliminary Amendment</div><div>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small></div><div>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></div><div>16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</div><div>17. <input type="checkbox"/> Other: _____</div></div>	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



13281 U.S. PTO

040804

PTO/SB/17 (10-01)

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EXTRA CLAIM FEES</td><td colspan="4" style="padding: 5px;">SUBTOTAL (3) (\$ 40.00)</td></tr><tr><td>Total Claims</td><td>15</td><td>-20 **</td><td>= 0</td><td>X</td><td>Fee from below</td><td>=</td></tr><tr><td>Independent Claims</td><td>5</td><td>-3 **</td><td>= 2</td><td>X</td><td>86</td><td>= 172</td></tr><tr><td>Multiple Dependent</td><td></td><td></td><td></td><td>X</td><td></td><td>=</td></tr><tr><td>Large Fee Code</td><td>Entity Fee (\$)</td><td>Small Fee Code</td><td>Entity Fee (\$)</td><td>Fee Description</td><td colspan="2">Fee Paid</td></tr><tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td colspan="2"></td></tr><tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td colspan="2"></td></tr><tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td colspan="2"></td></tr><tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td><td colspan="2"></td></tr><tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td colspan="2"></td></tr><tr><td colspan="5" style="text-align: right;">SUBTOTAL (2)</td><td colspan="2" style="text-align: right;">(\$ 172.00)</td></tr><tr><td colspan="4" style="padding: 5px;">**or number previously paid, if greater; For Reissues, see above</td><td colspan="4" style="padding: 5px;">*Reduced by Basic Filing Fee Paid</td></tr></tbody></table>				Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	1051	130	2051	65		1052	50	2052	25		1053	1053	1053	130		1812	2,520	1812	2,520		1804	920*	1804	920*		1805	1,840*	1805	1,840*		1251	110	2251	55		1252	420	2252	210		1253	950	2253	475		1254	1,480	2254	740		1255	2,010	2255	1,005		1401	330	2401	165		1402	330	2402	165		1403	290	2403	145		1451	1,510	1451	1,510		1452	110	2452	55		1453	1,330	2453	665		1501	1,330	2501	665		1502	480	2502	240		1503	640	2503	320		1460	130	1460	130		1807	50	1807	50		1806	180	1806	180		8021	40	8021	40	40	1809	770	2809	385		1810	770	2810	385		1801	770	2801	385		1802	900	1802	900		1. 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SUBMITTED BY			Complete (if applicable)		
Name (Print/Type)	Gary D. Yacura	Registration No. Attorney/Agent)	35,416	Telephone	703-668-8000
Signature				Date	April 7, 2004

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